

**KARL PHILIPP MULLER
LEBERENSTRASSE 27
CH 8472 SEUZACH
SWITZERLAND**

**Chambers of the Honorable Robert E. Gerber
United States Bankruptcy Court
One Bowling Green, Room 621, New York
New York 10004-1408**

Seuzach, March 08 2011

Refer:

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK**

Chapter 11 Case No. 09-50026 (REG)

In re

**MOTORS LIQUIDATION COMPAGNY, et al.,
f/k/a General Motors Corp., et al.
Debtors**

Claim information:

**My name is MULLER KARL PHILIPP
Claim No. 9973
Date 10/14/2009
Debtor Motors Liquidation Company**

**My claim is like the same as dispatched with date October 2nd 2009 to
THE GARDEN CITY GROUP Inc
Attn: Motors Liquidation Company
PO BOX 9386
Dublin Ohio 43017-4286
and enclosed as a copy at this letter.**

**I can not accept the expungement (declination) my administrative expenses with
an amount – till now – of US \$ 794.70 and it will be more with each letter.
So it is at this moment US \$ 850.- (including write this letter and the stamp to it).
The administrative expenses will raise with each writing from and to the court.**

I declare that my total claim (the certificate of debt; the unpaid percentage for 2008, 2009 2010 and the administrative expenses) is an amount of US \$ 31'135.99 (per March 08th 2011); see enclosed attachements

I'm looking forward to hear positive news, from the
UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK
Especially the "NEW GM" make profit !

Kind regards



(KARL MULLER)

Attachements:

Exhibit A page 2 (DEBTORS' 216TH OMNIBUS OBJECTION TO CLAIMS

AMINISTRATIVE PROOF OF CLAIM with stamp "The Garden City Group Feb 11, 2011

My PROOF OF CLAIM from Date:10/2/09

Copy: Buy the Certificate of Debt from March 17 2004

216th Omnibus Objection

Exhibit A

Motors Liquidation Company, et al.
Case No. 09-50026 (REG), Jointly Administered

CLAIMS TO BE DISALLOWED AND EXPUNGED

JUNE B LEE 900 ROCKY FOUNTAIN TERRACE MYERSVILLE, MD 21773	70911	Motors Liquidation Company	\$0.00 Unliquidated	Beneficial Bondholder Claim	Pgs. 1-5
KARE PHILIPS MULLER LEBEREN STRASSE 27 CH 8473 SUZACH SWITZERLAND SWITZERLAND	70884	Motors Liquidation Company	\$0.00 Unliquidated	Beneficial Bondholder Claim	Pgs. 1-5
MARGARITA BLOCK 54 WESTMINISTER DRIVE PALM COAST, FL 32164	70769	Motors Liquidation Company	\$25,000.00	Beneficial Bondholder Claim	Pgs. 1-5
MARY ANN GABLEHOUSE 3120 58 AVE CT GREELEY, CO 80634	70912	Motors Liquidation Company	\$16,078.71	Beneficial Bondholder Claim	Pgs. 1-5
MICHAEL KISCHNER LORENZ-DIEHL STRASSE 16 MAINZ 55131 GERMANY GERMANY	70995	Motors Liquidation Company	\$0.00 Unliquidated	Beneficial Bondholder Claim	Pgs. 1-5
MISS JOANN HITMAN 328 HARMONY CHURCH RD GILLSVILLE, GA 30543	70923	Motors Liquidation Company	\$5,000.00	Beneficial Bondholder Claim	Pgs. 1-5
OSCAR BERLAND 3005 CARLSON BLVD EL CERRITO, CA 94530	70934	Motors Liquidation Company	\$9,062.50	Beneficial Bondholder Claim	Pgs. 1-5
PETER HIOS 50-35 210 ST. BAYSIDE, NY 11364	70766	Motors Liquidation Company	\$35,000.00	Beneficial Bondholder Claim	Pgs. 1-5
ROGER W SCHNELLE 11277 HWY B UNIONVILLE, MO 63565	70841	Motors Liquidation Company	\$5,977.46 Unliquidated	Beneficial Bondholder Claim	Pgs. 1-5
RONALD & BARBARA KOPP 10998 HARDCASTLE RD. BROOKLYN, MI 49230	70655	Motors Liquidation Company	\$20,000.00	Beneficial Bondholder Claim	Pgs. 1-5

- (1) In the "Claim Amount" column, the amounts listed are taken directly from the proofs of claim, and thus replicate any mathematical errors on the proofs of claim. Where the claim amount is zero, unliquidated, unidentified, or otherwise cannot be determined, the amount listed is "0.00". For claims filed in a foreign currency, "Foreign Currency" is displayed in the "Claim Amount" column.
- (2) Claims on the exhibit are sorted in alphabetical order based on the creditor name as listed on proof of claim form.

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK		ADMINISTRATIVE PROOF OF CLAIM
<p>Name of Debtor: (Check only one)</p> <p><input checked="" type="checkbox"/> Motors Liquidation Company (d/b/a General Motors Corporation)</p> <p><input type="checkbox"/> MLCS, LLC (d/b/a Saturn, LLC)</p> <p><input type="checkbox"/> MLCS Distribution Corporation (d/b/a Saturn Distribution Corporation)</p> <p><input type="checkbox"/> MLC of Holden, Inc. (d/b/a Chevrolet-Saturn of Holden, Inc.)</p> <p><input type="checkbox"/> Remediation and Liability Management Company, Inc. (subsidiary of General Motors Corporation)</p> <p><input type="checkbox"/> Environmental Corporate Remediation Company, Inc. (subsidiary of General Motors Corporation)</p>		<p>09-50026 (REG)</p> <p>09-50027 (REG)</p> <p>09-50028 (REG)</p> <p>09-13558 (REG)</p> <p>09-50029 (REG)</p> <p>09-50030 (REG)</p>
<p>The deadline for each person or entity (including, without limitation, individuals, partnerships, corporations, joint ventures, government entities, and trusts) to file a proof of claim for certain administrative expenses against the Debtor is (a) on or before February 14, 2011 at 5:00 p.m. (Eastern Time), with respect to administrative expenses arising between June 1, 2009 and January 31, 2011, and (b) the date that is sixty (60) days after the Effective Date at 5:00 p.m. (Eastern Time), with respect to administrative expenses arising between February 1, 2011 and the Effective Date.</p>		
<p>Name of Creditor (The person or other entity to whom the debtor owes money or property): KARL PHILIPP MULLER</p> <p>Name and address where notices should be sent: LEBERENSTRASSE 27 CH-8472 SEUZACH SWITZERLAND</p> <p>Telephone Number: +41 52 335 14 20</p>		<p><input checked="" type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.</p> <p><input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case.</p> <p><input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.</p>
<p>Last four digits of account or other number by which creditor identifies debtor: Chapter 11 Case No 04-50026 My CLAIM No 9973</p>		<p>Check here <input type="checkbox"/> replaces a previously filed claim, dated: _____ if this claim <input type="checkbox"/> amends</p>
<p>1. Basis for Claim</p> <p><input type="checkbox"/> Goods sold</p> <p><input type="checkbox"/> Services performed</p> <p><input type="checkbox"/> Money loaned</p> <p><input type="checkbox"/> Personal injury/ wrongful death</p> <p><input checked="" type="checkbox"/> Taxes = STAMPS</p> <p><input checked="" type="checkbox"/> Other = TRANSLATION the 5 written Doc #</p> <p><i>see the receipt</i></p>		<p><input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a)</p> <p><input type="checkbox"/> Wages, salaries, and compensation (fill out below)</p> <p>Last four digits of SSN: _____</p> <p>Unpaid compensation for services performed from _____ to _____ (date) (date)</p>
<p>2. Date debt was incurred (must be on or after June 1, 2009):</p>		<p>3. If court judgment, date obtained:</p>
<p>4. Total Amount of Administrative Claim: \$ 794,70</p>		
<p><input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.</p>		
<p>5. Brief Description of Administrative Expense Claim (attach any additional information): * from THE GARDEN CITY GROUP INC. re: the "MLC"</p>		<p>6. Creditor: All payments made on this claim have been credited and deducted for the purpose of making this proof of claim.</p>
<p>7. Supporting Documents: Attach copies of supporting document, such as promissory notes, contracts, security agreements, and evidence of perfection of liens. DO NOT SEND ORIGINAL DOCUMENTS.</p>		<p>8. This Administrative Proof of Claim:</p> <p><input checked="" type="checkbox"/> is the first filed proof of claim evidencing the claim asserted herein</p> <p><input type="checkbox"/> supplements a proof of claim filed on or about _____</p> <p><input type="checkbox"/> replaces/amends a proof of claim filed on _____</p>
<p>9. Date-Stamped Copy: To receive an acknowledgment of the filing to your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim. <i>The envelope is not stamped; as the stamp for THIS letter is not included</i></p>		
<p>Date: February 7th 2011</p>	<p>Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): K. Muller KARL PHILIPP MULLER</p>	<p>THIS SPACE IS FOR COURT USE ONLY</p> <p><i>as the rec</i></p>
<p>Penalty for presenting fraudulent claim: Fine up to \$700,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.</p> <p>"REGISTERED LETTER" to you</p>		

UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

PROOF OF CLAIM

Your Claim is Scheduled As Follows:

Name of Debtor (Check Only One):

- ☒ Motors Liquidation Company (f/k/a General Motors Corporation)
☐ MLCS, LLC (f/k/a Saturn, LLC)
☐ MLCS Distribution Corporation (f/k/a Saturn Distribution Corporation)
☐ MLCS of Harlem, Inc. (f/k/a Chevrolet Saturn of Harlem, Inc.)

Case No.

09-50026 (REG)
09-50027 (REG)
09-50028 (REG)
09-13558 (REG)

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case, but may be used for purposes of asserting a claim under 11 U.S.C. § 503(b)(9) (see item 5). All other requests for payment of an administrative expense should be filed pursuant to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property): GENERAL MOTORS CORP.

Name and address where notices should be sent:

MÜLLER KARL PHILIPP
LEBERENSTR. 27
CH-8472 SEUZACH; SWITZERLAND

Telephone number:

+41 52 335 14 20

Email Address:

karl.mueller@bluewin.ch

Name and address where payment should be sent (if different from above):

SPARKASSE BODENSEE
D-78462 KONSTANZ; GERMANY

Telephone number:

+49 7531 285 5 314

☐ Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number: _____
(if known)

Filed on: 10/02/2009

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

☒ Check this box if you are the debtor or trustee in this case.

If an amount is identified above, you have a claim scheduled by one of the Debtors as shown. (This scheduled amount of your claim may be an amendment to a previously scheduled amount.) If you agree with the amount and priority of your claim as scheduled by the Debtor and you have no other claim against the Debtor, you do not need to file this proof of claim form, EXCEPT AS FOLLOWS: If the amount shown is listed as DISPUTED, UNLIQUIDATED, or CONTINGENT, a proof of claim MUST be filed in order to receive any distribution in respect of your claim. If you have already filed a proof of claim in accordance with the attached instructions, you need not file again.

1. Amount of Claim as of Date Case Filed, June 1, 2009: \$240,204.60

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. If all or part of your claim is asserted pursuant to 11 U.S.C. § 503(b)(9), complete item 5.

☒ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. Basis for Claim: MONEY LOANED
(See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: 61109

3a. Debtor may have scheduled account as: GM → Motors Liquidation Company
(See instruction #3a on reverse side.)

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Equipment ☒ Other

Describe: 2007.13 Annual Interest Rate %8.375 for 1 year

Value of Property: \$ 26,231.73 + 2009 percentage

Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$

Basis for perfection: _____

Amount of Secured Claim: \$

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain in an attachment.

Date: 10/2/09

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.
Karl Müller (KARL MÜLLER)

FOR COURT USE ONLY



COPY

SPARKASSE BODENSEE
POSTFACH 1880
88008 FRIEDRICHSHAFEN

15. March 2004

Postfach 18 80, 88008 Friedrichshafen

HERRN
KARL PHILIPP MÜLLER
LEBERENSTR. 27

0000 4 0000
0301
0054

CH-8472 SEUZACH

FRIEDRICHSHAFEN, 15.03.2004

FRANZ ROTH
VERMÖGENSMANAGEMENT
TELEFON (07531)285-314

Wertpapierabrechnung Kauf *= BUY*

EUR 17.000,00	8,375% General Motors Corp. EO-Notes 2003(33)	Kenn-Nr. XS0171943649
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Kurs	114,87 % / Kurs variabel	Depotnummer	173061
Börse	STUTTGART	Ordernummer	9955023
Schlussstag	15.03.2004	Zinstermin	5. Juli gjz.
Zinsvaluta	16.03.2004	mit Kupon	05.07.2004
Depotgutschrift	Wertpapierrechnung	Endfälligkeit	05.07.2033
Lagerland	LUXEMBURG		
Kurswert			19.527,90 EUR S
Zinsen aus 259 Tagen		8,375 %	1.003,65 EUR S
Maklergebühren		0,750 %	12,75 EUR S
Provision		0,500 %	97,64 EUR S
Clearinggebühren			7,67 EUR S
Lastschrift Konto 41 2338			20.649,61 EUR S

MONETARY VALUE

Wert 17.03.2004

17. MARCH

Mit freundlichen Grüßen

SPARKASSE BODENSEE

Kapitalerträge sind einkommensteuerpflichtig.
Bitte aufbewahren. Kann für steuerliche Zwecke bedeutsam sein.

- Irrtum vorbehalten -
Einwendungen gegen diese Mitteilung müssen unverzüglich erhoben werden.
Die Unterlassung unverzüglicher Einwendung gilt als Genehmigung.